

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE**

In re:

W.R. GRACE & CO., et al.,

Debtors.

Chapter 11

**Case No. 01-1139 (JKF)
Jointly Administered**

Objection Date: December 28, 2009 at 4:00 p.m.

Hearing: Schedule if Necessary (Negative Notice)

**COVER SHEET TO SIXTIETH MONTHLY INTERIM APPLICATION OF
DAVID T. AUSTERN, ASBESTOS PI FUTURE CLAIMANTS' REPRESENTATIVE
FOR COMPENSATION AND REIMBURSEMENT OF EXPENSES FOR THE PERIOD
OCTOBER 1, 2009 THROUGH OCTOBER 31, 2009**

Name of Applicant:

David T. Austern, Asbestos PI
Future Claimants' Representative
("FCR")

Authorized to Provide Professional
Services to:

As the FCR

Date of Retention:

May 25, 2004

Period for which compensation is
sought:

October 1, 2009 through October 31, 2009

Amount of Compensation (100%) sought
as actual, reasonable, and necessary:

\$1,300.00

80% of fees to be paid:

\$1,040.00¹

Amount of Expense Reimbursement sought
as actual, reasonable and necessary:

\$ 0.00

¹ Pursuant to the Administrative Order, as Amended dated April 17, 2002, absent timely objections, the Debtors are authorized and directed to pay 80% of fees and 100% expenses.

Total Fees @ 80% and
100% Expenses: \$1,040.00

This is an: interim X monthly final application.

The total time expended for fee application preparation during this time period is 0.00 hours and the corresponding fees are \$0.00 and expenses are \$0.00. Such time spent on such tasks will be requested in subsequent monthly interim applications or have been performed by the FCR's bankruptcy counsel, Orrick, Herrington & Sutcliffe LLP.

COMPENSATION SUMMARY
OCTOBER 2009

| <u>Name of Professional Person</u> | <u>Position of Applicant</u> | <u>Hourly Billing Rate</u> | <u>Total Billed Hours</u> | <u>Total Compensation</u> |
|---|-------------------------------------|-----------------------------------|----------------------------------|----------------------------------|
| David T. Austern | Future Claimants' Representative | \$500.00 | 2.60 | \$1,300.00 |
| Grand Total: | | | 2.60 | \$1,300.00 |
| Blended Rate: \$500.00 | | | | |

Total Fees: \$1,300.00
Total Hours: 2.60
Blended Rate: \$1,300.00

COMPENSATION BY PROJECT CATEGORY

| <u>Project Category</u> | <u>Total Hours</u> | <u>Total Fees</u> |
|--------------------------------|---------------------------|--------------------------|
| Plan & Disclosure Statement | 2.60 | \$1,300.00 |
| TOTAL | 2.60 | \$1,300.00 |

EXPENSE SUMMARY

| <u>Expense Category</u> | <u>Total</u> |
|--------------------------------|---------------------|
| No expenses | 0.00 |
| TOTAL | \$0.00 |

Respectfully submitted,

Dated: December 7, 2009

/S/ DAVID T. AUSTERN
David T. Austern
Claims Resolution Management Corporation
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